

**Gila County, Arizona**  
***Write-in Candidate***  
**NOMINATION PAPER**  
**AFFIDAVIT OF QUALIFICATION**  
**CAMPAIGN FINANCE LAWS STATEMENT**  
(A.R.S. §16-311, 16-905(K)(5), 16-312)

*For Office Use Only*

You are hereby notified that I, the undersigned, a qualified elector, am a candidate for the office of \_\_\_\_\_ for the \_\_\_\_\_  
PARTY OR DISTRICT (circle one) to be voted on at the PRIMARY OR GENERAL (circle one) election to be held on \_\_\_\_\_  
\_\_\_\_\_, 20\_\_\_\_\_.

I will have been a citizen of the United States for \_\_\_\_\_ year(s) next preceding my election and will have been a  
citizen of Arizona for \_\_\_\_\_ year(s) next preceding my election and that my age is \_\_\_\_\_, and my date of birth is the  
\_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_\_, and have resided in Gila County for \_\_\_\_\_ year(s) and in the precinct of  
\_\_\_\_\_ for \_\_\_\_\_ year(s) before my election.

I do solemnly swear (or affirm) that at the time of filing, I am a resident of the county, district, or precinct which I  
propose to represent, and as to all other qualifications, I will be qualified at the time of election to hold the office that I seek,  
having fulfilled the constitutional and statutory requirements for holding said office.

\_\_\_\_\_  
Actual Residence Address or Description of Place of Residence (City/Town) (Zip)

\_\_\_\_\_  
Post Office Address (City/Town) (Zip)

**Print or type your name on the following line as you wish it to be listed  
on the Notice of Official Write-In Candidates.**

\_\_\_\_\_  
LAST NAME

\_\_\_\_\_  
FIRST NAME

\_\_\_\_\_  
CANDIDATE SIGNATURE

*Subscribed AND SWORN to (or affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_*

\_\_\_\_\_  
*Notary Public*

*My Commission Expires:* \_\_\_\_\_

(Seal)

I have read all applicable laws relating to campaign financing and reporting.

\_\_\_\_\_  
CANDIDATE SIGNATURE